

Retail Food Establishment Inspection Report

Floyd County Health Department Telephone:812-948-4726

Xlobo

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

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Establishment Name							Telephone Number	Date of Ir (mm/dd/y	Date of Inspection (mm/dd/yr) PERMIT #	
Establishment Address (number and street, city, state, zip code)									6/4/20 19-339	
426 Bank St (Suite 1) Now Albany 100 47150								6/7	120	1
Owner	mk >t	()~	. (1)	von biller	1,12 47157)	Purpose:	Fall	D.1	<u> </u>
UAINNA, 14							Routine	Follow-up Release Date / Laws		
Owner's Address							2. Follow-up	Summary of Violations:		
							2. Follow-up 3. Complaint			
Person in Charge Theila Winnich							4. Pre-Operational	c <u>\</u>	NC_	\mathcal{Q}_{R}
Responsible Person's E-mail							5. Temporary	Мели Ту	pe (See back	c of page)
							6. HACCP			
Certified Food Manager							7. Other (list)	12	33	_45
i							S MARKED "C" SUMMARY OF VIOLATIONS"	AND IN THE		
Sections	CINC	I.K.				Narrative			To Be Co	orrected By
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THIEIR WILLIAM							A.). Ingram (CFS)			
Received by (signature):							Inspected by (signature):			
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